COMMANDERS DIGEST

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White House Report on Dangers of Marihuana

I. THE DANGERS OF MARIHUANA

WHAT IS MARIHUANA?

Marihuana (pot, grass, weed, etc.) is a product of the Indian hemp plant known to botanists as *cannabis sativa* (L.). It is derived from the leaves and flowering tops of the female plant which are the source of the psychoactive material. Under federal law, marihuana is defined to mean all parts of the *cannabis* plant except for the stalks and sterilized seeds.

Marihuana contains a number of potent compounds called tetrahydrocannabinols (THC) which affect the mind and body in various ways. Potency of the drug varies greatly depending on growing conditions such as temperature, humidity, soil conditions, and methods of cultivation. Generally, plants grown in sunny, dry climates are most likely to contain the highest proportion of THC. The pharmacologic potency of any preparation of marihuana depends upon the amount of the THC which it contains.

The drug is most commonly smoked in hand-made cigarettes (reefers, sticks or joints). The butt is called a "roach". Marihuana is also smoked in ordinary pipes or water pipes. The effects of the drug are decreased three or four times if it is swallowed rather than smoked.

Various forms of marihuana are prepared from extracts of the plant. Hashish (hash, charas) is the purest and most concentrated of the natural *cannabis* products. It consists of the concentrated resin of the plant and is usually eight times as concentrated as the typical marihuana available in North America. Once rare in the United States, hashish is reported

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Editor's Note

A special Presidential task force relating to narcotics, marihuana and dangerous drugs reviewed the best scientific information now available on the health dangers inherent in the use of marihuana and has attempted to communicate unequivocally in this report the facts concerning the social implications of its use. All agencies dealing with one or more phases of the problem were involved in the study and their representatives actively participated in the deliberations and findings of the task force. This report is the joint efforts over an extended period of time of many persons from the following departments and agencies: The White House, the Departments of Justice, State, Defense, Treasury, Health, Education and Welfare, Agriculture, Labor, Commerce, and Transportation, the Bureau of Customs, Narcotics and Dangerous Drugs, the Immigration and Naturalization Service, and the National Institute of Mental Health. On June 3, 1969, Attorney General Mitchell and Secretary of the Treasury Kennedy submitted the report to the President who by memorandum dated June 27, 1967, concurred in the report's conclusions and recommendations.

Increased Marihuana Use Evident; Produces Mental, Physical Effects

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to be increasingly obtainable in response to a rising demand. Relating foreign studies of *cannabis* use to the American scene is difficult because of the generally higher potency of the *cannabis* products used abroad. Marihuana grown in this country is typically of lower potency and is often weakened further by additives such as oregano. However, Mexican grown marihuana has a high potency and is regularly sold in the United States. It should be noted that all marihuana products lose strength over time.

While marihuana contains many ingredients, THC is believed to be the principle psychoactive substance. With the synthesis of THC in 1966,[1] and the demonstration of its psychopharmacological effects in 1967,[2] a basis was finally established for more precise, systematic pharmacological investigation of the drug. At present, THC is being synthesized in research quantities. Along with other natural marihuana constituents, THC is being made available under appropriate precautions to qualified researchers through the National Institute of Mental Health's Center for Studies of Narcotics and Drug Abuse.

Since marihuana products produce effects similar to other hallucinogens like LSD, and their reactions are often indistinguishable from those produced by other psychedelics, they are pharmacologically classified in that category.

PRESENT EVIDENCE OF EXTENT OF USE

Marihuana use has been rapidly increasing in the past five years. Although originally restricted to certain jazz musicians, artists and ghetto dwellers, it has now appeared among the middle and upper class. A conservative estimate of persons, both juvenile and adult, who have used marihuana at least once is about five million.

One of the most alarming aspects of the current drug crisis is the involvement of young people. In California alone juvenile arrests for drug offenses increased from 1,271 in 1961 to 14,112 in 1967. Of the 14,112 juvenile arrests in California during 1967, 10,987 were arrested for marihuana violations. To understand the full significance of this figure it must be compared with the year 1961 in which there were 401 arrests. In 1967 alone there were over 2,000 more arrests for marihuana violations than in the previous six years combined.

Two years ago, surveys in parts of the country where marihuana use is known to be high suggested that twenty percent of the college students in those areas had experience with marihuana. Present evidence, although spotty, suggests that as many as sixty percent of the students on some campuses have used it. Some students feel that official estimates are low, and that the true extent of drug abuse among college

students is even higher. Statements prepared by the National Student Association project the possibility of nearly one million drug arrests of young people in 1972. There are also many reports of increasing use of marihuana in high schools although there is not sufficient data to establish a country-wide pattern. Significantly, most recent college data indicated that many college users were first exposed to marihuana in high school. However, the bulk of users are more aptly characterized as "triers" rather than habitual "potheads". Two out of three who have tried the drug have used it not more than one to ten times. In the most recent (Fall, 1968) survey based on a geographic area of high use, about one person in ten reported using marihuana regularly for as much as a year's duration. Finally, there is growing evidence that the number of pre-teenagers who are using marihuana is increasing.[3]

EFFECTS

The use of marihuana produces a variety of mental and physical effects. If active marihuana is smoked effectively (inhaled and kept in the lungs as long as possible) symptoms may appear after one or two puffs and the effect may last from several minutes to several hours.

Dr. Stanley F. Yolles, Director, National Institute of Mental Health, has stated:

. "Little can be added to previous reports on the toxicity of marihuana. It is considered to be a mild hallucinogen, taken by the usual route of smoking, occasionally by ingestion. It may induce a mild euphoria and lead to heightened suggestibility and faulty perception, really an exaggerated notion of thinking more clearly, profoundly and creatively. In addition, it is known to cause reddening of the membranes of the eyes, rapid heartbeat, muscular incoordination, unsteadiness, drowsiness, and distortion of time and space perception.

"In acute intoxication, especially when ingested, it may also produce visual hallucinations, pronounced anxiety, paranoid reactions, and transient psychoses lasting four to six

[1] Journal of the American Chemical Society 1965, pp. 3273-3275.
[2] Isbell, H. et al., Psychopharmacologia, 1967, pp. 184-188.
[3] Blum, R. H. et al., Students and Drugs, Vol II, 1969, pp. 13-47.

WHO Report Notes Nature of Marihuana Intoxication

hours. It generally tends to lessen inhibitions and creates for the user a false reality based on his wants, his motivations, or the situation. In this respect it is similar to LSD, but its effects are not as potent.

"The muscular incoordination and the distortion of space and time perception commonly associated with marihuana use are potentially hazardous, since the drug adversely affects one's ability to drive an automobile or perform other skilled tasks.

"We still do not know enough about the long-term effects of marihuana use. As in the case of tobacco, it is possible that there are serious consequences of chronic use which will only become apparent through careful, longtime studies."[4]

A 1965 report on drug dependence for the World Health Organization describes the nature of marihuana intoxication in the following terms:

"Among the more prominent subjective effects . . . are: hilarity . . . carelessness; loquacious euphoria . . . distortion of sensation and perception . . . impairment of judgment and memory; distortion of emotional responsiveness; irritability; and confusion. Other effects, which appear after repeated administration . . . include: lowering of the sensory threshold, especially for optical and acoustical stimuli . . . and aggressiveness as a possible result of various intellectual and sensory derangements; and sleep disturbances."[5]

[4] Hearings before the Subcommittee to Investigate Juvenile Delinquency of the Senate Committee on the Judiciary, Mar. 4-6, p. 4658, 1968.
[5] Eddy, N. B. et al. Drug Dependence: Its Significance and Characteristics. Bull. World Health Organization. 32:721, 1965.

In small, low potency quantities marihuana may act as a mild euphoriant and sedative somewhat similar to alcohol. In relatively high doses psychotic-like phenomena, quite similar to those associated with LSD use, have been reported. Recurrences of the marihuana state (flashbacks) without actually taking the drug again have been reported. These recurrences can be anxiety provoking. Unlike the stronger hallucinogens, such as LSD, which produce wakefulness, marihuana tends to be more sedative in its properties. THC in sufficiently high doses can induce psychotic reactions in almost any individual.

Despite marihuana's long history—spanning thousands of years and many cultures—there has been comparatively little sound research on this drug. Only four laboratory studies investigating marihuana's immediate effects on humans have been reported in the American scientific literature. The first of these was done with a group of 34 soldiers in the Canal Zone. A second study, reported in the 1944 LaGuardia Report, is based on 72 prisoners' responses to marihuana extract. In 1946, a small number of chronic using prisoners were studied. A more carefully controlled study recently produced a report on some laboratory work with marihuana in humans done partially with NIMH support.[6]

All of these studies generally found loss of inhibitions, and feelings of relaxation and self-confidence together with some mild impairment of thinking and coordinated performance.

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[6] Weil, A.T. et al., A Controlled Study of Cannabis in Humans, Science, pp. 1234-1242, 1968.

THE SECRETARY OF DEFENSE

OCTOBER 8, 1969

Drug abuse is one of our nation's more serious and growing problems. The misuse of drugs, especially marihuana and the hallucinogens, is at alarming levels in some areas of the United States.

Since the Armed Forces is a cross section of the civilian population, the incidence of drug abuse is also on the rise in the military community. In an effort to stem the current rise and to eliminate drug abuse, DoD is constantly preparing factual information for use by the commander and his staff.

DoD policy on drug abuse is set forth in DoD Directive 1300.11. I urge each commander not only to become thoroughly familiar with this Directive but to make every effort to understand the seriousness of the problem and, through a system of education and enforcement, help to combat it.

MELVIN R. LAIRD

AMA Says Marihuana Is Dangerous Drug, Further Research Considered Essential

(Continued from Page 3)

It has also been demonstrated that THC, when administered in a sufficiently high dosage, will cause a psychotic-like state, similar to that induced by LSD.

While no long-term physical effects of marihuana use have been adequately demonstrated in this country, the American experience has been extremely brief and additional studies are needed to resolve this and other issues. Although there is no firm evidence that marihuana use in humans has either teratogenic or genetic implications, this possibility should be explored —particularly in view of some evidence on this point with respect to LSD. It is possible that there are serious consequences of chronic use which will only become apparent after careful, long-term studies. In foreign countries where heavy use of the stronger cannabis preparations is common, a variety of physical ailments supposedly related to marihuana use have been reported—notably conjunctivitis, chronic bronchitis and certain digestive ailments.

There have also been reports of adverse psychological effects of marihuana both in this country and abroad. Recently a group of some 1500 psychiatrists, psychiatric residents, internists, general practitioners and psychologists in the Los Angeles area reported that they had seen almost nineteen hundred "adverse reactions" to marihuana.[7] It is difficult to interpret this finding since "adverse reaction" was poorly defined, and there has been no follow-up to define just what the reactions to the drug were. However, there have been reports of increased number of hospitalizations following the usage of marihuana.

Considerable concern has been expressed in the United States over the possibility of personality changes and a loss of motivation among youthful marihuana users. The potential effects of a reality distorting agent on the future psychological development and maturation of the adolescent users are of special concern. Normal adolescence is a time of considerable psychological turmoil. Patterns of coping with reality developed in the teen years help determine later adult behavior.

[7] Ungerleider, J.T. et al., A Statistical Survey of Adverse Reactions to LSD in Los Angeles County, American Journal of Psychiatry, Sept., 1968, p. 355.

Persistent use of an agent which serves to ward off reality during this critical period of development is likely to affect adversely the future ability of the individual to cope with the demands of a complex society. While systematic studies of large numbers of American chronic users are not yet available, a number of clinicians have observed that at least some users show evidence of a loss of conventional motivation. They seem to prefer instead a non-goal oriented life style, which emphasizes immediate satisfactions to the exclusion of ambition and future planning. The "pothead", then, may well retard his own chances for emotional growth by not learning how to deal with life stress. Characteristic personality changes among impressionable young persons from the regular use of marihuana include apathy, loss of effectiveness, and diminished capacity or willingness to carry out complex long-term plans, endure frustration, concentrate for long periods, follow routines, or successfully master new material. It has also been observed that verbal facility is often impaired, both in speaking and writing.

The British cannabis report by the Advisory Committee on Drug Dependence (1968) concluded:

> There have been reports, particularly from experienced observers in the Middle and Far East, which suggest that *very heavy long-term* (italics, theirs) consumption may produce a syndrome of increasing mental and physical deterioration to the point where the subject is tremulous, ailing and socially incompetent. This syndrome may be punctuated on occasions with outbursts of violent behavior. It is fair to say, however, that no reliable observations of such a syndrome have been made in the Western World, and that from the Eastern reports available to us, it is not possible to form a judgment on whether such behavior is directly attributable to cannabis-taking.[8]

PROGRESSION TO OTHER DRUGS

A basic question that frequently arises is the extent to which marihuana use in some sense predisposes users to escalate to stronger and more dangerous drugs. There is little question that most heroin and LSD users have had experience

[8] Cannabis, Report by the Advisory Committee on Drug Dependence, 1968, pp. 14-34.

Records Show Notable Crime Increase From Use of Marihuana

with marihuana. Indeed, 85 to 90 percent of heroin addicts reported that they started their use of drugs with marihuana. There is also a question whether any but a small percentage of marihuana users progress to other drugs, the evidence tending to show that only five percent of the habitual marihuana users progress to heroin addiction.

In discussing the question of progression, it is vital to distinguish between the casual experimenter with marihuana, and the regular and continuous user, and between physical addiction and psychological dependency.

A casual experimenter by definition is not dependent upon the drug. A regular and continuous user, on the other hand, may very well be dependent upon it.

Once he has become psychologically dependent upon one drug as a "crutch" to cope with life stress, the user is substantially more susceptible to the acquisition of a larger crutch through the medium of a stronger drug.

An example of the importance of this distinction is the heroin addict. The most desperately "hooked" of junkies with a "habit" costing hundreds of dollars per day can be "detoxified" in under 8 days, and brought to a point where the drug will produce no physical reaction or withdrawal symptoms. Yet, let that individual be imprisoned for 5 years without access to the drug, upon release he will seek a pusher. He will do so because he is still psychologically dependent upon heroin. Recognition of the fact is basic to the New York State rehabilitation program which spends years, rather than weeks, treating addicts. Their physical craving is terminated in days—their psychological dependency is the subject of years of treatment.

In view of the foregoing, it must be concluded that regular and continuous use of *cannabis* can and does produce psychological dependency and marked susceptibility to progression to stronger reality concealing drugs.

The progression is, however, probably not a consequence of the pharmacological properties of marihuana, but rather is due to sociological and psychological factors present in a vulnerable minority of users. For example, in ghetto situations where both drugs are freely available, sometimes from the same supplier, a progression based on availability may be likely. Similarly, heavy drug using subcultures may encourage widespread experimentation with a wide variety of drugs. It is generally true that a heavy marihuana user is more likely to be a multiple drug user. In one study, half of the heavy users of marihuana had tried LSD. One in seven had used LSD more than 25 times or had tried heroin. Two out of five heavy users in this same study had abused amphetamines. This trend to multiple drug experimentation may increase in the future. In this connection it is important to point out that use of a combination of dangerous drugs may have a synergistic effect and may result in the death of the user.

There is reason to believe that heavy marihuana users are likely to have considerable interest in the use of the stronger forms of *cannabis* such as hashish. If hashish is available, many would probably use it in preference to low-potency marihuana. The history of mind-altering drugs invariably reveals that excessive indulgence increases sharply as more potent preparations of a given drug become available.[9]

MARIHUANA VS. ALCOHOL

Some marihuana users have tried to justify their behavior by claiming that it is no worse than consuming alcohol. It is estimated that the consumption of alcohol is a major problem for some five to six million Americans who are unable to control their drinking. In most cases, excessive drinking of alcoholic beverages causes serious physical, psychological, social and vocational problems for these people and their families. It is well known that one half of the fatal traffic accidents in the United States are related to excessive drinking.[10]

While alcoholism constitutes a major social problem, surely it is not valid to justify the adoption of a new abuse on the basis that it is no worse than a presently existing one. The result could only be added social damage from a new source. It would not solve our alcohol problem and would only lead to additional numbers of marihuana intoxicated individuals. Moreover, marihuana, unlike alcohol, is nearly always consumed by its users for the express purpose of obtaining a "high," a disorientating intoxication.

Allegations have been made and attributed to government officials that marihuana is no more dangerous than alcohol. When these stories appear in the mass media they often do

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[9] McGlothlen, W. et al. American Journal of Psychiatry, Sept., 1968, p. 373.
[10] 1968 Alcohol and Highway Safety Report, U. S. Government Printing Office, 1968, pp. 11-21.

Mixture of Dangerous Drugs May Result in Death

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considerable harm, even when subsequently retracted. Dr. James Goddard, former Commissioner of the Food and Drug Administration, was extensively quoted as saying that marihuana is no more dangerous than alcohol. Dr. Goddard was, in fact, misquoted and never made such a statement. Although the wire service issued a written apology, the retraction has never caught up with the misquote.

THE POSITION OF THE AMA AND WHO

The American Medical Association has stated that marihuana is a dangerous drug and, as such, is a public health problem.[11] They reiterate that while no physical dependence develops this does not mean that it is an innocuous drug. Further research is considered essential, and educational programs should be directed to all segments of the population.

The World Health Organization recently reaffirmed its previous opinions that *cannabis* is a drug of dependence, produces public health and social problems, and that its control must be continued.[12] More basic data are needed on acute and chronic effects on the individual and society to permit accurate assessment of the degree of hazard to public health.

MARIHUANA USE AND CRIME

Aside from the fact that marihuana use and possession is in itself a crime, it has not been proven that its use is a direct cause of other types of criminal behavior. Generally, assertions that marihuana plays a casual role in the commission of crime are based on reports from other than scientific agencies. The validity of these impressions is, however, questionable because of the unscientific basis on which such data has been collected. The New York Mayor's Committee (1944) reported that many criminals might use marihuana, but the Committee did not feel marihuana played a casual role in crime. In the United Kingdom, the use of *cannabis* has not been generally regarded as a direct cause of crime.

The President's Commission on Law Enforcement and Administration of Justice has observed:

> One likely hypothesis is that, given the accepted tendency of marihuana to release inhibitions, the effect of the drug will depend on the individual and the circumstances. It might, but certainly will not necessarily or inevitably lead to aggressive behavior or crime. The response will depend more on the individual than the drugs.[13]

While perhaps it cannot be statistically proven that marihuana or other dangerous drugs may be the cause of originating crime, nevertheless the use of marihuana or dangerous drugs is related to increased criminal activity.

According to the President's Crime Commission Task Force Report on Narcotics and Dangerous Drugs, page 11, the FBI submitted criminal histories on 7,920 narcotic offenders. These

criminal histories, when examined as to marihuana users and heroin users, indicated that the criminal careers of narcotics users, both marihuana and heroin, were longer, and resulted in more frequent arrest activities than the average non-narcotic criminal offender. For the marihuana offender this comparison demonstrated that during the course of his criminal career he was proportionately more frequently involved in violent crimes than the normal non-narcotic criminal offender.

CONCLUSION

There is no question that the widespread use of marihuana represents a significant mental health problem.

There is no known beneficial result from the use of marihuana; there are, on the other hand, definite detrimental effects.

More research is needed to further our understanding of the effects of marihuana use. However, it is clear that, depending on the dose, the active ingredient found in marihuana may have substantial detrimental effects on both the mental and physical well-being of the user. In this connection it is important to point out that use of a combination of dangerous drugs may have a synergistic effect and may result in the death of the user.

Medical evidence neither proves nor disproves that marihuana is a cause of crime. Criminal records do establish clearly an accelerating rate of association between crime and the use of marihuana.

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[11] Marihuana and Society, Journal of the American Medical Association, June 24, 1968, pp. 1181-1182.
[12] World Health Expert Committee on Drug Dependence, WHO Technical Report Series 407, 1969, p. 19.
[13] Task Force Report: Narcotics and Drug Abuse. President's Commission on Law Enforcement and Administration of Justice, 1967, p. 13.

GENERAL CHESAREK

AF Has Plan to Solve Munitions Problems

The Air Force hopes to solve "significant" munitions problems by developing a plan to give commanders the most flexible family of weapons possible, Grant L. Hansen, Assistant Secretary of the Air Force (Research and Development) has said.

Mr. Hansen indicated the present problems arise from having a multitude of aircraft and munitions built at different times for different purposes.

"Broadly speaking," he said, "our munitions and fuzing goals are to reduce the number of types, to increase the flexibility of each type, and to insure that our inventory is fully compatible with our projected aircraft force."

He continued, the long range goal for dispensers is to achieve an all altitude, high and low speed, level and dive capability. The desired dispenser should be compatible with all submunitions and with all appropriate aircraft.

For target activated munitions, we seek to develop a family of mines effective against personnel, various types of vehicles, and shallow watercraft.

Anti-material munitions should have the broad delivery capabilities I just mentioned plus selectable air-to-surface fuzing. We have initiated a special study to review the entire spectrum of incendiaries in order to choose new munitions.

In free-fall bombs, we are seeking simplified fuzing, high-density carriage, and compatibility with second generation bomb guidance kits.

Gen. Chesarek Asks Industry For Assistance in Economizing

The Commanding General of the Army Materiel Command has challenged the transportation industry to "provide us better service at less cost . . ."

General F. J. Chesarek told the 24th Annual Transportation and Logistics Forum of the National Defense Transportation Association, "The Army is pressing for economies in every aspect of logistics endeavor. Because your share of this pie is so substantial, we must look to you for help."

In Fiscal Year 1969, the Army spent about $2 billion to transport men and material. General Chesarek estimates the same amount will be spent during the current fiscal year.

"This, however, is just the pure transportation cost and, therefore, is an inaccurate measure of what the movement of people and things really costs because closely associated are the costs of packaging, preservation, in-transit losses, loading and unloading, and other associated costs. All these things should be grouped under the heading 'cost of transportation.'

'Your industry has not been totally blind to these associated costs. The containerization program is a noteworthy advance, and the degree to which containerization has thus far been applied is only step one of its evolution."

General Chesarek called for "much new thought and imagination" in packaging. "I have not seen much which minimizes cost while providing the required protection. It is becoming a self-contained industry whose motives, I'm sure, are good but which does not, in my opinion, give appropriate consideration to cost."

He told the Association he also would like to see handling systems devised that are best suited to the military environment.

"A system specifically designed to complement the site, climate, labor, connecting transportation systems and other critical features of an area of operation. What this means is that what works in Europe may not in Vietnam, and what is good for peacetime purposes may be quite unsuited for military contingencies."

Transportation, as viewed by the major customer, the general said, is in many respects an industry divided against itself.

"I do not know whether this great Association has attempted to broaden its spectrum by joining with the associations supporting these other industries. I hope you do so, and quickly. There is a lot of gold to be mined in developing strong integrative links of all industries which contribute to the total cost of transportation."

COMMANDERS DIGEST

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A HELPING HAND—U.S. Air Force Captain Earle F. Maloney, communications-electronics maintenance officer at Binh Thuy AB, Republic of Vietnam, assists a young Vietnamese lad who has his hands full during a recent "Autumn Festival" party sponsored by Detachment 3, 619th Tactical Control Squadron. (U.S. Air Force Photo by A1C Terry Witter)

Human Goals Credo Signifies 'Dignity and Worth'

The heart and soul of every American is captured in the first sentence of the Defense Department's new Human Goals Credo. It makes crystal clear his heritage; where he, as an individual, stands in today's society, and pronounces him too valuable to be measured or appreciated by mere standards.

Very simply the sentence states: "Our Nation was founded on the principle that the individual has infinite dignity and worth."

Basically, that is the philosophy adopted by the Department of Defense. The military organization must be a humanitarian group of people who represent in composite the most compassionate, humane and effective fraternity of people to be found anywhere, if the national security of a freedom loving people is to be kept secure.

When Roger T. Kelley became Assistant Secretary of Defense (Manpower and Reserve Affairs) in March, one of his first recommendations to Secretary of Defense Melvin Laird after taking office was that the Defense Department should collect the philosophy which underlies its essentially humanitarian approach to the management of people and express these in some form of Human or People Goals.

There is not any doubt that "people" are the Defense Department's most important resource, both those in uniform and civilians alike.

On this premise a set of Human Goals was developed for the Defense Department. These goals were not written by or for any one person, but rather as the combined product of the entire Department of Defense.

The words of the document were carefully chosen, they were discussed at meetings, they were amended many times, and finally approved by the senior leadership in the Department of Defense. Participating in the production of these goals were the Secretary of Defense, the Deputy Secretary, the Joint Chiefs of Staff, the Service Secretaries and the Assistant Secretaries of the Services for Manpower and Reserve Affairs.

By this action the official imprint of the Defense Department's Human Goals document now becomes the responsibility of all leadership of the Department of Defense.

This will give the Department a high human standard upon which to measure its activities.

Most important of all is the recognition of the human element of the Services, and the humane quality of the total management approach within the Defense Department, but at the same time always taking into consideration its responsibilities toward national security, the several million people who implement its programs, and the nation of citizens.

The document, which was quoted in the Aug. 23 issue of COMMANDERS DIGEST, was signed by:

Secretary of Defense; Deputy Secretary of Defense; Chairman, Joint Chiefs of Staff; Secretary of the Army; Secretary of the Navy, Secretary of the Air Force; Chief of Staff, Army; Chief of Naval Operations; Chief of Staff, Air Force; and the Commandant, Marine Corps.

Gen. Chapman Cites Today's Serviceman

The Marine of today "is truly the heart of this country," said General Leonard F. Chapman, Jr.

At the same time he emphatically denied the theory that this generation of young people have abandoned the old values and morals of past generations.

The Marine Corps commandant recognizes that such a theory has taken root through dissident voices of a minority, but maintains that the true, young individualist is found in the quiet majority of this generation.

He said this is the young man who has decided to serve his country.

Following are excerpts from General Chapman's speech before the Kiwanis Club at Little Rock, Ark., Oct. 7.

"I am a Marine, so it is Marines I know best, and it is Marines I speak of. But I have seen this same quality of rugged individualism in all of the young Americans serving their country in this bitter war. Marines, sailors, soldiers, airmen, and coast guardsmen continue to serve in the best tradition of this country —with dedication, energy and courage. They are young Americans, and they still keep in their hearts all of the values that have made this nation great . . .

"The benefits provided for our veterans are just payment for service rendered. But in a free country, where free will is the key to honorable service —money can't be full compensation. The American people must show their faith in these men—must honor them—must give them the dignity of recognition and appreciation.

MEDAL OF HONOR RECIPIENTS—At a White House ceremony Oct. 9 President Nixon presented the Medal of Honor to four members of the Army for their gallantry in Vietnam. Front row, left to right, are Sergeant Robert M. Patterson, Captain James M. Sprayberry, President Nixon, Captain Jack H. Jacobs, and Major Patrick H. Brady. Back row, (l-r), are General Bruce Palmer, Army Vice Chief of Staff, Secretary of the Army Stanley Resor, Secretary of Defense Melvin Laird, and an unidentified aide.

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